



# State of Washington Application for a Water Right

For Ecology Use  
Fee Paid 10.00  
Date 7-26-02  
OKA

Please follow the attached instructions to avoid unnecessary delays.

## Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Blake Lenard Bivins Jr Home Tel: ( ) -  
Mailing Address P.O. Box 29766 Work Tel: (800) 395-7229  
City Bellingham State WA Zip+4 98228 + 1766 FAX: ( ) -

## Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name Blake Lenard Bivins Jr Home Tel: (800) 266-4330 then  
Mailing Address P.O. Box 29766 Work Tel: ( ) dial 109256  
City Bellingham State WA Zip+4 98228 + 1766 FAX: ( ) message only  
Relationship to applicant Same

## Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 5 (.01 cfs) (☐ gallons per minute or  
☒ cubic feet per second) from a ☐ surface water source or ☐ ground water source (check only one) for the purpose(s)  
of Domestic. ATTACH A "LEGAL"  
DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not  
sufficient.

Estimate a maximum annual quantity to be used in acre-foot per year: 9 acre ft per year

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From   /  /   to   /  /  

## Section 4. WATER SOURCE

DAM

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: <u>unnamed spring</u>	A permit is desired <u>  </u> (s).
Number of diversions: <u>1</u>	
Source flows into (name of body of water):	Size & depth of well(s):

### LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: S. corner 625' N.E 150' w/o proposed concrete & earthen dam 4' H + 10' W.

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SW</u>	<u>NW</u>	<u>36</u>	<u>37N</u>	<u>30EWM</u>	<u>OKanagon</u>			

52  
OKA

For Ecology Use Date Received: July 26, 2002 Priority Date: July 26, 2002 OKANOGON  
SEPA: Exempt/Not Exempt FERC License # Dept. Of Health #  
Date Accepted As Complete 08-08-02 By    Date Returned By    WRIA: 52



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: \_\_\_\_\_
- B. Briefly describe your proposed water system. (See instructions.)  
*Dam across spring run-off channel 4'H & 10' wide for irrigation purposes for garden use.*
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO  
PROVIDE DOCUMENTATION.

## Section 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: \_\_\_\_\_ Type of connection \_\_\_\_\_  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO  
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

**Complete C. and D. only if the proposed water system will have fifteen or more connections.**

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Completed for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 5
- B. List total number of acres for other specified agricultural uses:  
Use garden Acres 5  
Use fruit & nut trees Acres 5  
Use \_\_\_\_\_ Acres \_\_\_\_\_
- C. Total number of acres to be covered by this application: 5
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO  
If yes, enter permit no.: \_\_\_\_\_
- E. Farm uses:  
Stockwater - Total # of animals \_\_\_\_\_ Animal Type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_



## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? *Dam*

☒ YES    ☐ NO

*NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.*

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. From Wauconda Wt E on Hwy 20 to N. Cape Labelle Rd R 2 miles to forest service Rd stay L to 1st R. 1½ mile to cattle guard ½ mile on R. 813 Cape Labelle Rd.

## Section 10. REQUIRED MAP

A. Attach a map of the project. (**See instructions.**)

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☒ YES    ☐ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

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B. Does the applicant own the land on which the water source is located?

☐ YES    ☐ NO

If no, submit a copy of 'agreement:

**I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.**

Blake Leonard Bivins Jr.  
Applicant (or authorized representative)

Date 7-20-02

Date \_\_\_\_\_

Same  
Landowner for place of use (if same as applicant, write "same")

Date \_\_\_\_\_

## APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s) is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).